

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.  
**10602074**  
APPLICANT(S)

FILING DATE  
**06-24-03**

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
7						
8						
9	1					
10		1				
11		1				
12		1				
13		1				
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49						
50						
TOTAL IND.	1					
TOTAL DEP.	11					
TOTAL CLAIMS	12					

	A		B		C	
	IND	DEP	IND	DEP	IND	DEP
51						
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TOTAL CLAIMS						